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## LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

|   |  |                                  |   |
|---|--|----------------------------------|---|
| 1. Registrant Name<br><u>THOMAS G POWERS</u>  |  |                                  |   |
| 2. Address <input type="checkbox"/> Check if different than previously reported<br><u>2008 ROCKINGHAM ST</u>                                  |  |                                  |   |
| 3. Principal Place of Business (if different from line 2)<br>City: <u>MCLEAN</u> State/Zip (or Country) <u>VA 22101</u>                       |  |                                  |   |
| 4. Contact Name<br><u>Self</u>  |  | Telephone<br><u>703 532-2143</u> | E-mail (optional)                                 |
| 5. Senate ID #<br><u>485 32-12</u>  |  | 6. House ID #<br><u>34552000</u> |   |
| 7. Client Name <input type="checkbox"/> Self <u>NATIONAL ASSOCIATION OF GOVERNMENT GUARANTEED LEADERS</u>                                     |  |                                  |   |
| 8. Year <u>2000</u> Midyear (January 1-June 30) <input type="checkbox"/> OR Year End (July 1-December 31) <input checked="" type="checkbox"/> |  |                                  |   |
| 9. Check if this filing amends a previously filed version of this report <input type="checkbox"/>   |  |                                  | 11. No Lobbying Activity <input type="checkbox"/> |
| 10. Check if this is a Termination Report <input type="checkbox"/> → Termination Date: _____  |  |                                  |   |

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

|   |  |
|---|--|
| <b>12. Lobbying Firms</b><br>INCOME relating to lobbying activities for this reporting period was:<br>Less than \$10,000 <input type="checkbox"/><br>\$10,000 or more <input checked="" type="checkbox"/> → <u>\$30,000</u><br><small>Income (nearest \$20,000)</small><br>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client). | <b>13. Organizations</b><br>EXPENSES relating to lobbying activities for this reporting period were:<br>Less than \$10,000 <input type="checkbox"/><br>\$10,000 or more <input type="checkbox"/> → \$ _____<br><small>Expenses (nearest \$20,000)</small><br><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options.<br><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only<br><input type="checkbox"/> Method B. Reporting amounts under section 6033(h)(8) of the Internal Revenue Code<br><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code |
|---|--|

Signature \_\_\_\_\_

THOMAS G. POWERS

Registrant Name: THOMAS G POWERS Client Name: NATL ASSOC OF GOVT GUAR LEADERS

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

15. General issue area code SMB (one per page)

16. Specific lobbying issues

HR 2615; promotion of guaranteed loans made under § 7(a) of the Small Business Act; promotion of B & I LOANS, USA

17. House(s) of Congress and Federal agencies contacted

Check if None

SENATE  
House of Representatives  
SMALL BUSINESS ADMINISTRATION  
Department of Agriculture

18. Name of each individual who acted as a lobbyist in this issue area

| Name            | Covered Official Position (if applicable) | Y                        | N                        |
|-----------------|---|--------------------------|--------------------------|
| THOMAS G POWERS |   | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |   | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |   | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |   | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |   | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |   | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |   | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |   | <input type="checkbox"/> | <input type="checkbox"/> |

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature: Thomas G. Powers Date: 1/11/01  
Printed Name and Title: THOMAS G POWERS